

EXHIBIT 7

1 IN THE UNITED STATES DISTRICT COURT
2 FOR THE NORTHERN DISTRICT OF NEW YORK
3 Civil Action No. 7:16-cv-8191

4 - - - - - x
5 JOHN DOE NO. 1, JOHN DOE NO. 2, :
6 NEW YORK STATE RIFLE AND PISTOL :
7 ASSOCIATION, INC., :
8 Plaintiffs, :
9 v. :
10 PUTNAM COUNTY, and MICHAEL C. :
11 BARTOLOTTI, in his official capacity :
12 as County Clerk for Putnam County, :
13 Defendants. :
14 - - - - - x

15
16 DEPOSITION OF ROBERT SEGE, MD, PHD, FAAP

17
18 Friday, July 12, 2019 at 10:33 a.m.

19
20 DoubleTree by Hilton Boston Bayside Hotel
21 821 Washington Street
22 Boston, MA 02111

23
24 -----
25 REPORTED BY: Deanna J. Dean, RDR, CRR

1 A P P E A R A N C E S

2

3 Representing the Plaintiffs:

4 COOPER & KIRK, PLLC

5 1523 New Hampshire Avenue, NW

6 Washington, DC 20036

7 (202) 220-9600

8 BY: CHARLES J. COOPER, ESQ.

9 ccooper@cooperkirk.com

10 BY: DAVIS COOPER, ESQ.

11 dcooper@cooperkirk.com

12

13 Representing the Defendants:

14 STATE OF NEW YORK

15 OFFICE OF THE ATTORNEY GENERAL, LETITIA JAMES

16 The Capitol

17 Albany, NY 12224

18 (518) 776-2621

19 BY: C. HARRIS DAGUE, ESQ.

20 harris.dague@ag.ny.gov

21

22

23

24

25

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25

I N D E X

Examination	Page
ROBERT SEGE, MD, PhD, FAAP	
By Mr. Cooper	5

E X H I B I T S

Plaintiff	Description	Page
Exhibit 1	Expert Opinion of Robert Sege	9
Exhibit 2	Curriculum Vitae of Robert Sege	9
Exhibit 3	Article Titled "Pediatric Firearm-Related Injuries in the United States"	28
Exhibit 4	Article Titled "Firearm-Related Injuries Affecting the Pediatric Population" (Pediatrics, April 2000)	34
Exhibit 5	Article Titled "Firearm-Related Injuries Affecting the Pediatric Population" (Pediatrics, April 2012)	36

1	E X H I B I T S (cont'd.)		
2			
3	Plaintiff	Description	Page
4	Exhibit 6	Article Titled "Suicide	80
5		Mortality in the United	
6		States: The Importance of	
7		Attending to Method in	
8		Understanding Population-Level	
9		Disparities in the Burden of	
10		Suicide"	
11	Exhibit 7	Data from CDC WISQARS Accessed	92
12		7/11/19	
13	Exhibit 8	Article Titled "Children and	97
14		Unintentional Firearm Death"	
15		by D. Hemenway and S. Solnick	
16	Exhibit 9	Article Titled "8 Things You	119
17		Can Do to Support ASK (Asking	
18		Saves Kids) Day"	
19			
20			
21			
22			
23			
24			
25			

1 P R O C E E D I N G S

2 ROBERT SEGE, MD, PHD, FAAP

3 a witness called for examination by counsel for the
4 Plaintiffs, having been satisfactorily identified
5 by the production of his driver's license and being
6 first duly sworn by the Notary Public, was examined
7 and testified as follows:

8 EXAMINATION

9 BY MR. COOPER:

10 Q. Good morning, Dr. Sege.

11 A. Good morning.

12 Q. My name is Charles Cooper. I represent
13 the plaintiffs in this case, plaintiffs John Doe 1
14 and 2, and I'm going to be asking you a few
15 questions today, as you know.

16 I'd like to ask you first to state your
17 full name for the record.

18 A. Sure. Robert David Sege.

19 Q. Just a couple of ground rules.

20 It's important that you provide verbal
21 responses rather than head nods so the court
22 reporter can record them. And I will try my best
23 not to talk over you. If I begin to make a comment
24 or ask a question before you've finished your
25 answer, just signal to me, because I'm not doing

1 Is there anything in this report that
2 suggests that the public accessibility of handgun
3 permit holders' names and addresses has prevented
4 suicides?

5 MR. DAGUE: Object to form.

6 You can answer if you can.

7 A. I don't think that specific question was
8 addressed in this review.

9 Q. Okay. Are you aware of any study that has
10 addressed that question?

11 A. I'm not aware of any study that has
12 addressed that specific question, no.

13 Q. Were you aware of any study that would --
14 that would be in any way illuminating on what the
15 answer to that question might be?

16 MR. DAGUE: Object to the form.

17 You can answer.

18 A. Yeah. If I were to look, the American
19 Academy of Pediatrics sponsored a program called
20 ASK, Asking Saves Kids, where they suggested that
21 parents might ask a neighbor if there was a gun in
22 the home before allowing their child to go there,
23 and discuss how the gun is stored and those sort of
24 things. And so I would look and see what the
25 underlying evidence for that program was, which is

1 know how much point there is in getting there, but
2 I don't think it matters what I think. It's
3 just -- I'm only referring back to that table so we
4 can understand that our questions refer to that
5 table.

6 Q. Okay. Would you -- I'm going to make a
7 representation to you about at least how I count
8 these narratives up --

9 A. Sure. Of course.

10 Q. -- and just ask you if you would disagree
11 with it.

12 The way I count and understand these
13 narratives, I count 6 of the 15 examples involving
14 long guns and three other examples that didn't
15 identify the type of firearm involved one way or
16 the other, whether it was long gun or a handgun.

17 Is that a fair --

18 MR. DAGUE: Object to form.

19 A. Okay. Want me to do the same thing you
20 did?

21 Q. Thank you. Thank you.

22 A. Then I will.

23 (Discussion off the record.)

24 A. Okay. I got five handguns, seven long
25 guns, and three unknown. Is that what you said?

1 Q. I actually got six long guns and three
2 unknowns.

3 A. I got three unknowns, several long guns,
4 and five handguns. But --

5 Q. Okay. Well, we're close enough.

6 A. We're close enough. So, yes, I would
7 agree with your characterization.

8 Q. Okay. And the -- at least if one accepts
9 these 15 narratives as roughly representative, it's
10 clear that at least a substantial minority of the
11 guns involved in these kinds of deaths are long
12 guns?

13 A. That's correct.

14 Q. Do you believe that unintentional firearm
15 fatalities among children and adolescents could be
16 eliminated or at least very sharply reduced if guns
17 were properly stored as the AAP recommends:
18 unloaded and in a locked place?

19 A. Yes. We recommend that guns be locked up
20 unloaded with the ammunition locked separately, and
21 there's substantial data that shows that will
22 reduce it by at least 50 percent.

23 Q. At least 50 percent.

24 And at page 5 of Exhibit 8, the authors
25 say that -- and I can't find it here, but it's

1 A. Yeah.

2 Q. You've mentioned that previously in your
3 testimony.

4 Why don't we go ahead and mark as Exhibit
5 9 the document you cite at Footnote 8.

6 (Plaintiff Exhibit 9 marked for
7 identification.)

8 BY MR. COOPER:

9 Q. I think you've already testified that you
10 support this campaign and actually follow it in
11 your own clinical work. Is that correct?

12 A. Mm-hmm. Mm-hmm. Yes.

13 Q. Do you believe that the ASK campaign, if I
14 can call it that, the AAP's ASK campaign has been
15 effective in helping to curb the rates of firearm
16 deaths and fatalities to children and adolescents?

17 A. I think I previously testified that I'm
18 not aware of studies that show directly its
19 effectiveness or not. One of the important things
20 I think is it raises parents' awareness about this
21 issue, which is always worth doing.

22 Q. And in your experience, what have you
23 found in terms of whether parents have actually
24 implemented the ASK policy in their own
25 child-rearing practices?

1 being interpreted as a nitpicker or something like
2 that. So they want to be -- they don't consider it
3 very friendly, I guess, to be maybe second-guessing
4 the safety practice of another family, being
5 perceived as questioning the safety practices of
6 another family. So if they don't know the parents
7 very well, they might not want to ask.

8 Q. In your experience or in your opinion, do
9 you think that the incidence of gun ownership and
10 possession is a controversial one?

11 A. Yes, I think it is.

12 Q. Okay. Among some -- there are some
13 parents who and people who are very opposed to gun
14 ownership and the presence of guns in homes, and
15 then, as you say, you have some of your relatives
16 are begun enthusiasts and they're quite on the
17 other side of that. I mean, this is a
18 controversial public policy and political issue, is
19 it not?

20 A. It is.

21 Q. Okay. And would you agree with me if I
22 suggest that some parents are reluctant to broach
23 controversial -- politically controversial issues
24 such as that with the parents of their friends?

25 MR. DAGUE: Object to form.

1 You can answer.

2 A. Certainly the answer is do some parents do
3 anything? The answer is always yes. I have to
4 agree with you.

5 Q. Okay. Well -- but that -- are you -- if a
6 parent were to ask the parent of another child if
7 their young daughter, you know, was contemplating
8 an abortion, would that be a subject you think
9 would be awkward and difficult to take up?

10 MR. DAGUE: Object to form.

11 A. I would think so.

12 Q. I would, too. I would, too.

13 A. Okay.

14 Q. And so I'm just trying to see if you will
15 agree with the proposition that controversial
16 public policy or political issues are often avoided
17 among parents of schoolmates and playmates.

18 MR. DAGUE: Object to form.

19 You can answer.

20 A. I agree with you, but the reason I'm
21 hesitant is that attitudes vary a great deal with
22 region. When we ran focus groups to the American
23 Academy of Pediatrics, we found in one region of
24 the country parents who did not own guns would lie
25 to their neighbors and say that they do own a gun

1 or have one in the home, because that was the
2 social norm in their community.

3 So we all -- none of us live in this
4 homogeneous United States where 43 percent believe
5 that and 42 -- we all live within our local
6 communities and subcultures. So that's why I'm a
7 little hesitant, because before I started talking
8 to people, I thought I knew the answer.

9 Q. And I think that answer is very
10 illuminating and I appreciate it. And I want to
11 ask you about the focus groups you just mentioned.

12 Tell me about the focus group. Were you
13 involved in a study that involved focus groups of
14 that kind?

15 A. Yeah. It was published also in
16 "Pediatrics." It's in my CV. We ran focus groups
17 around the country in developing violence
18 prevention materials for the American Academy of
19 Pediatrics. So we would go to different
20 communities in different parts of the United States
21 and talk with parents about a range of issues
22 involving child-rearing.

23 Q. So I take it it was a range of issues that
24 included subjects unrelated to firearms?

25 A. Oh, yes.

1 Q. But it also included the subject of
2 firearms?

3 A. Yes, it did.

4 Q. And which article are you referring to?

5 A. If you can refer to Exhibit 2.

6 How am I doing with it?

7 Q. You're doing better than I.

8 A. I'll try to find it for you.

9 It was the article published in 2006 in
10 "Pediatrics," with myself as the first author,
11 Hatmaker, De Vos, Levin-Goodman, and Spivak.

12 Q. What page are you referring to?

13 A. Page 12 of my CV.

14 Q. Page 12.

15 A. So it goes "Trokel," "Trokel," "Sege."

16 Q. I'm sorry. Would you, on my copy of it,
17 would you maybe highlight that?

18 A. I can do that.

19 Q. Okay. Thank you.

20 So that's -- and it's entitled
21 "Anticipatory guidance and violence prevention:
22 results from family and pediatrician focus groups."
23 All right. It says it right there.

24 Do you explain your methodology in
25 selecting focus groups?

1 it?

2 A. Apparently not. My understanding of the
3 law is that it's handguns and certain other -- I
4 think assault weapons are included, certain other
5 guns. But there are definitely kinds of firearms
6 that are not included in the law, that are not
7 covered.

8 Q. Okay. Would you agree that, generally,
9 long guns are not part of that?

10 A. Generally, long guns are not part of it,
11 yeah.

12 Q. And we previously discussed, and you just,
13 I think, just mentioned the fact that there are --
14 there are people in New York who qualify to be
15 excluded from the requirement that their names and
16 addresses be made public record --

17 A. That's correct.

18 Q. -- even though they are permitted to have
19 a handgun license?

20 A. Mm-hmm. Yes.

21 Q. Do you have any knowledge concerning how
22 many people there are or what percentage of the
23 lawful handgun permit holders are excluded and have
24 opted out?

25 MR. DAGUE: Object to form.

1 A. I don't know quantitatively. My
2 understanding is it's a minority of permit holders.
3 In other words, most permit holders would be in the
4 database.

5 Q. Do you have any knowledge about how many
6 people in New York may possess a handgun that they
7 have not registered?

8 A. I don't have such knowledge, no.

9 Q. Do you have any knowledge about how many
10 people in New York own a long gun that is not
11 required to be permitted and therefore registered?

12 MR. DAGUE: Object to form.

13 A. I don't.

14 Q. Do you have any knowledge about how many
15 parents of children and adolescents actually
16 consult the public records regarding handgun permit
17 holders before they permit their children to visit
18 the homes of friends?

19 A. No, I do not.

20 Q. Do you have any knowledge about how many
21 people in New York who have registered a handgun
22 and obtained a permit to possess it no longer have
23 that handgun in New York?

24 A. No, I do not.

25 Q. Okay. You agree that there is undoubtedly

1 some number of people who have gotten rid of a
2 handgun that they were registered to possess?

3 MR. DAGUE: Object to form.

4 A. I'm sure that's true.

5 Q. When you say in your report that Section
6 400 -- and I'm quoting now from the top of
7 page 6 -- "may help to curb the unacceptable rates
8 of firearm deaths and injuries to children and
9 adolescents," on what do you base that?

10 A. I think the discussion is that, as we've
11 discussed, there are a number of childhood
12 unintentional injuries, suicides, and homicides
13 that occur with guns obtained in various ways,
14 including from a friend or a friend's home. And
15 conscientious parents may be able to foresee that
16 possibility and prevent their child from being
17 involved in a tragedy. So it certainly opens up
18 the possibility of reducing that rate.

19 Q. If a parent consulted the public records
20 through the Freedom of Information Act process or
21 any other source of that public record data, and it
22 did not disclose that the parents of their child's
23 friend possessed a gun, and so is it not possible
24 that the parent could permit their child to visit
25 the home of that friend on the incorrect factual

1 went down that hypothetical, anything is possible,
2 but I think that it seems that having more
3 information is always better than having less.

4 Q. Well, you state in your opinion and in
5 your report here a couple of times that access to
6 the public record of the friend's -- with respect
7 to the possibility of guns in the home of the
8 friend, that the parent can use that information to
9 either deny the child authorization to visit the
10 friend's home -- correct?

11 A. Mm-hmm.

12 Q. -- or make inquiry of the parents of the
13 friend?

14 A. Yeah.

15 Q. Okay. Is it not also -- does it not
16 follow from that observation that a parent who
17 consults the public record and insofar as the
18 public record is concerned concludes that the
19 friend's home does not have a registered handgun in
20 it, because the parents aren't revealed in that
21 public record, would then conclude that the child
22 can visit the friend's home for the playdate?

23 MR. DAGUE: Object to form.

24 A. It's certainly possible that might happen,
25 and I can imagine that the parent is a retired

1 police officer who had a lawful gun and wasn't
2 required to register. And I can certainly imagine
3 all kind of things might happen, and that's
4 possible. But I think that my expert opinion is it
5 also gives the parents when the report is positive
6 an opportunity to say, as I mentioned later on
7 page 6, that -- to call up you up and say, "You
8 know, Chuck, my son here is a little troubled, and
9 I know you have a registered gun, and I just want
10 to make sure that it's not available to him if he
11 comes over and visits, and visits with Paul."
12 Right?

13 So you can have that conversation, because
14 I know -- and that's when I say it creates parents
15 an opportunity to act. That's the kind of thing
16 that I think that this would allow.

17 Q. Would --

18 THE WITNESS: Didn't mean to pick on you
19 in particular.

20 Q. Would you counsel parents of your patients
21 if they consulted the public record and it did not
22 disclose the presence of a gun in the house to
23 nonetheless ask the parents whether they have a gun
24 in the house, be it a long gun, be it an
25 unregistered handgun, be it a gun belonging to

1 somebody who has opted out of the public record
2 process, to ask them if they -- if there is a
3 firearm present in the home?

4 A. I think we established that I sign on to
5 the AAP's ASK campaign, so I would in general
6 counsel parents that. We also discussed that maybe
7 they wouldn't follow my advice exactly, but I
8 would -- I would certainly never suggest that if
9 you get a negative inquiry, you can rest reassured
10 that there's no danger.

11 Q. You support the law requiring that
12 handguns be registered and that the names and
13 addresses of permit holders be public record.
14 Correct?

15 MR. DAGUE: Object to form.

16 A. Yes.

17 Q. Would you support a law that made the name
18 and addresses of parents who do not vaccinate their
19 children a matter of public record?

20 MR. DAGUE: Object to form.

21 A. I have no idea how that's relevant, but I
22 do support schools having the right to not allow
23 children who aren't vaccinated in the school. And
24 so I think that there are issues.

25 I know a lot of parents now, particularly

1 in New York State, are asking their child's
2 playmates/friends if they've been vaccinated, and
3 certainly have gotten questions about that for kids
4 who are too young to be immunized. So it's a
5 different kettle of fish, because I -- but I don't
6 really know how to answer it and I haven't thought
7 about it until this very second. It never occurred
8 to me that you would have a public registry of
9 shaming people for immunizations.

10 Q. I mean, you would agree, wouldn't you,
11 that a parent, as you say, would be interested to
12 know if they were arranging a playdate at the home
13 of a friend who had not been vaccinated for, say,
14 the measles?

15 MR. DAGUE: Object to form.

16 You can answer.

17 A. Okay. Just in direct answer to your
18 question, if my child has been vaccinated against
19 the measles, it would not necessarily matter to me
20 whether the other child had been vaccinated or not.
21 If -- there is no vaccine for firearms injuries, so
22 that's why I'm having real trouble with this
23 analogy, because it is possible for me as a parent
24 to protect my own child against vaccine-preventable
25 diseases, for the most part, and it's not possible

1 for me as a parent to protect my child against the
2 effect of a bullet.

3 Q. I think I understood you to say that in
4 New York this is becoming a controversial issue and
5 that schools are exercised about it and are denying
6 entry to the schools of kids who have been
7 vaccinated and --

8 A. Have not been vaccinated.

9 Q. -- have not been vaccinated for various
10 communicable diseases, and that -- and that is
11 notwithstanding the fact that the vast majority of
12 the one -- of the other playmates have been
13 vaccinated. Is that not true?

14 MR. DAGUE: Object to form.

15 A. That's true, but the other issue is that
16 at a given school, there may be some children who
17 are on immunosuppressive therapy for things like
18 juvenile arthritis or cancer or God knows what.
19 But there are kids who are particularly vulnerable
20 at a school, and with a large enough school, you
21 can guess that some kids will be -- will be
22 vulnerable. So it's the responsibility of the
23 school to make sure that that doesn't -- that
24 they're protected.

25 But I feel like you're trying to lead me

1 to a different controversy. There are a lot of
2 controversies in the world.

3 MR. DAGUE: Just answer the question,
4 Doctor.

5 THE WITNESS: Sorry.

6 MR. DAGUE: It's all right.

7 Q. Yeah. Well, look. I am asking you what I
8 believe to be a relevant question about your expert
9 opinion as a pediatrician and a danger that
10 might -- a risk that might influence a parent to
11 deny their child permission to play at a friend's
12 home. And I think that if I were a parent of a
13 young child today, it would be a concern that I
14 would want to make inquiry about the parents of my
15 child's friend.

16 And I'm asking you your expert opinion on
17 whether you would counsel, in this time in
18 particular, your patients or the parents of your
19 patients to inquire of the parents of their child's
20 friends whether or not the friend has been
21 vaccinated for various communicable diseases.

22 MR. DAGUE: Object to form.

23 Q. And I -- and my question is would you
24 counsel your patients?

25 MR. DAGUE: Object to form. I'd just note

1 he hasn't been qualified as an expert on the
2 issue of vaccinations. You can ask him his
3 opinion as based on his experience as a
4 pediatrician. I'm fine with that. But just for
5 the record, we didn't qualify him as a
6 vaccination expert.

7 But you can answer to the extent you
8 understand it.

9 Q. Okay. Well, as a pediatrician, are you an
10 expert on vaccinations of children?

11 A. Sure.

12 Q. Okay. And do you have an opinion on -- do
13 you have a response to my question?

14 A. Yeah. So there are two circumstances in
15 which I would counsel a parent to inquire. One is
16 if their child is either too young to be immunized,
17 has a disease or a treatment that makes her or him
18 more vulnerable to infectious disease, so a child
19 with cancer or a child who is less than 1, those
20 sort of things, I would do that.

21 The second is if there is an epidemic
22 going around in the community and there are public
23 health warnings, because we know immunizations are
24 not 100 percent effective, I would counsel parents
25 to ask in those situations, because it's difficult

1 to know for sure whether any individual child is
2 one of the 90-plus percent for whom the
3 immunization was very effective or one of the few
4 percent where it didn't quite take.

5 So under those two circumstances where the
6 child had a particular individual vulnerability, I
7 would counsel parents to ask, which is a very
8 different question than what the school should do.
9 That's a different issue.

10 Q. Earlier in response to one of my questions
11 in this line of questioning, you said, I think you
12 used the term "public shaming" or -- what was the
13 term? Do you recall?

14 A. No, but I did use the word make a shaming
15 list or something like that, yeah.

16 Q. And what did you mean by that?

17 A. That making a public list of kids who
18 aren't immunized, the intention of that might be to
19 shame the parents into it, but it also creates
20 issues for the child who is perhaps an innocent
21 victim of all of this.

22 Q. The child who is not vaccinated?

23 A. Yes.

24 Q. And what are those issues?

25 MR. DAGUE: Object to form.

1 A. They might feel excluded or shamed by
2 their friends. I know that there are issues that
3 are discussed among pediatricians now about when
4 can a child request vaccinations when her or his
5 parents object, at what age are they mature enough.
6 So the child and parents' opinions may not be
7 completely in sync, and it may be the child who
8 suffers from that list in a way that's not fair.

9 Q. Would you think that a child, at whatever
10 stage of maturity a child can form a judgment about
11 his or her own vaccinations or status with respect
12 to vaccinations against disease, should be allowed
13 to make that decision despite parental resistance?

14 MR. DAGUE: Object to form.

15 A. The answer to that is yes, and certainly
16 once a person is 18, they can -- an adult -- they
17 can do what they want. And in adolescent medicine,
18 there are some specific circumstances where
19 children can consent to care on their own. And so
20 this is more of a legal ethical issue that I am not
21 expert on.

22 But the general concept that a child
23 should be able to have control over his or her own
24 body as they become an adult, the answer is yes.

25 MR. COOPER: Okay. So I think we're not

1 only in the ninth inning, but we may actually
2 have a couple of outs. And so if we can take a
3 break, I'll work back through my notes to see if
4 we're done.

5 MR. DAGUE: Sure. We'll step out and give
6 you guys a few minutes to chat.

7 THE WITNESS: Okay.

8 (Recess taken from 3:13 to 3:19 p.m.)

9 MR. COOPER: We can go back on the record.
10 Thank you very much, Dr. Sege. I
11 appreciate your time and attention today.

12 THE WITNESS: Thank you.

13 MR. COOPER: And I hope this hasn't been
14 too taxing. But I appreciate very much your
15 collegiality as well.

16 THE WITNESS: Thank you.

17 MR. DAGUE: Nothing further.

18 (Witness excused and deposition concluded
19 at 3:19 p.m.)

20

21

22

23

24

25

C E R T I F I C A T E

I, Deanna J. Dean, the certified court reporter and MA Notary Public before whom the proceeding occurred, pages 1 through 149, do hereby certify that the witness, ROBERT SEGE, MD, PHD, FAAP, was duly sworn; that the testimony of said witness was taken by me and thereafter reduced to this typewritten transcript under my supervision; that said transcript is a true record of the testimony given by said witness; that I am neither attorney or counsel for, related to, nor employed by any of the parties to the proceeding; and further, that I am neither a relative nor an employee of any attorney or counsel employed by the parties thereto, nor am I financially or otherwise interested in the outcome of the proceeding, or any action involved therewith.



Deanna J. Dean, RDR, CRR

Signed this 16th day of July 2019

My MA commission expires on December 28, 2018